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How has PEPA Changed Practice? Views of Employers of PEPA Participants

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Background

The Program of Experience in the Palliative Approach (PEPA) started in 2003 as an initiative of the Australian Government, Department of Health and Ageing. The overall aim of PEPA is to improve the quality, availability and access to palliative care for people who are dying, and their families, by providing opportunities for health professionals to undertake supported clinical placements in specialist palliative care services. PEPA participants are encouraged to identify strategies to transfer the learning from their clinical placement into their practice setting.

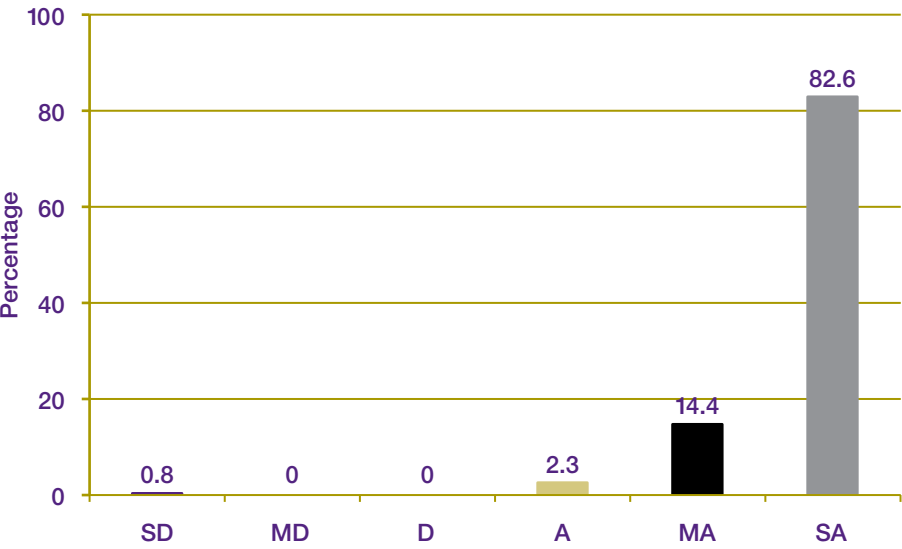
Method

From January 2007 to June 2008, 253 employers of PEPA participants were surveyed three months after their employee had completed their PEPA clinical placement, to evaluate their perceptions of the extent to which participation in the program had resulted in improvements in the care of dying people in their organisation.

Results

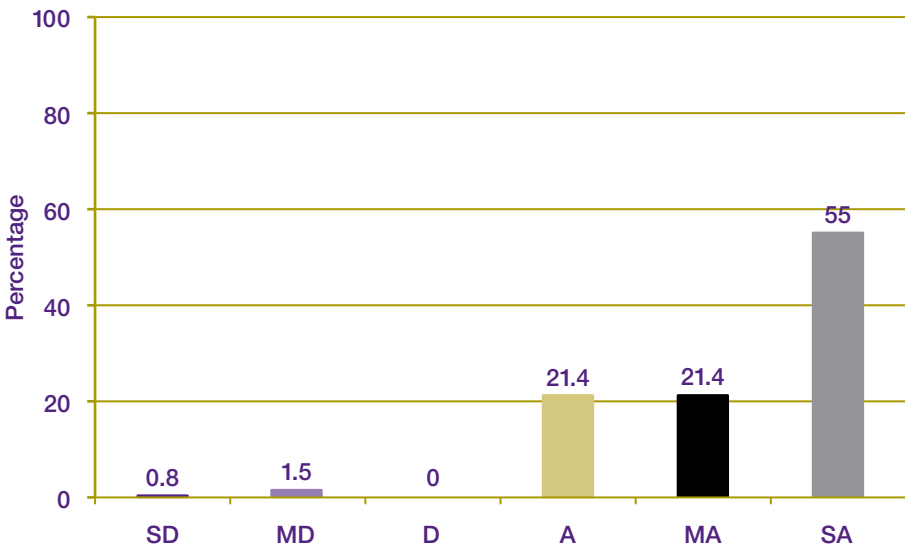
A total of 132 employers responded to the survey. Nearly 83% of employers strongly agreed (six point scale, 1=strongly disagree to 6=strongly agree) that their employees were able to apply the skills they learnt from their PEPA experience, with a further 16% agreeing (see Figure 1).

Figure 1: Applying Skills at Work



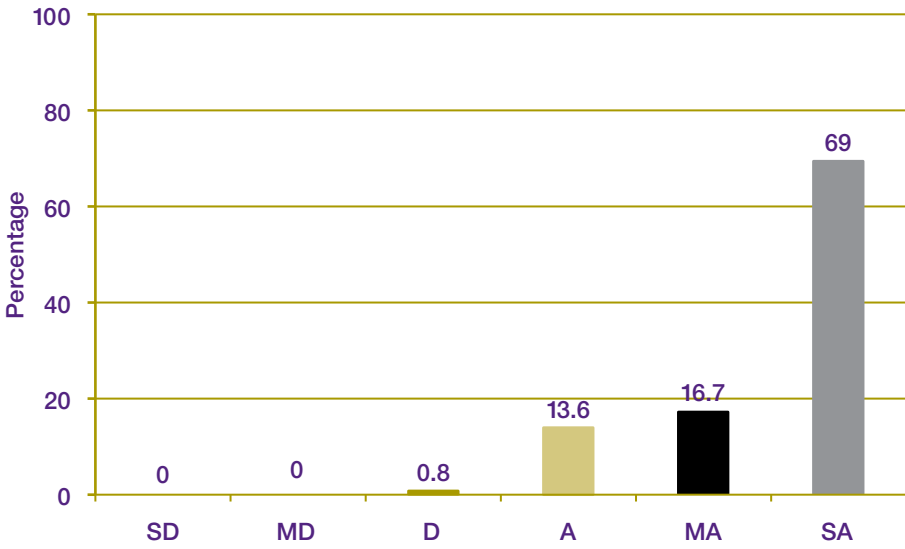
Almost 55% of employers strongly agreed that their employees have been given the opportunity to disseminate the knowledge and experience learnt during their placement to other staff, with a further 43% agreeing (see Figure 2).

Figure 2: Opportunity to disseminate knowledge



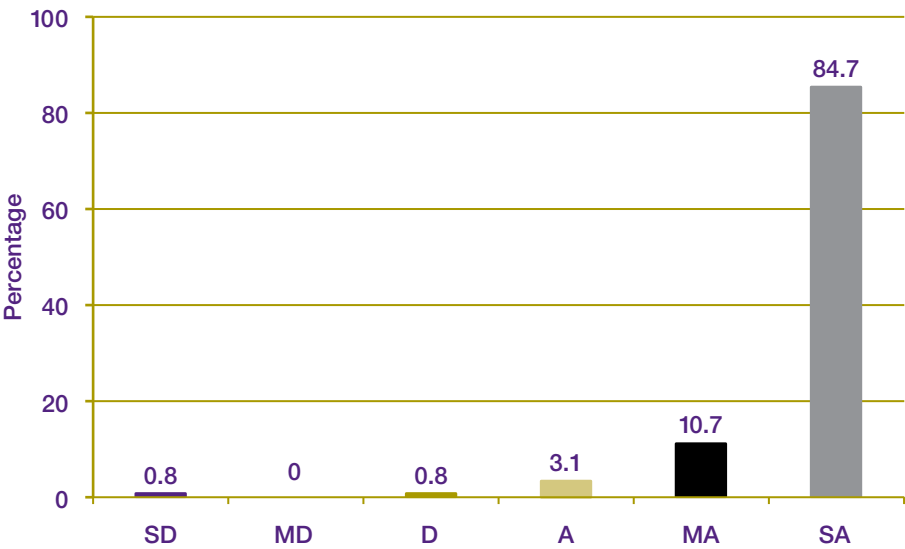
Almost 69% of employers strongly agreed that their organisation has increased its capacity to provide a palliative approach following their employee's PEPA placement, with a further 30% agreeing with this statement (see Figure 3).

Figure 3: Organisation has increased its capacity



A total of 85% of employers strongly agreed that partnerships between their organisation and the specialist palliative care workforce have been strengthened as a result of PEPA, with a further 14% agreeing with this statement (see Figure 4).

Figure 4: Partnerships strengthened



Employers were asked how their employee's participation in PEPA has influenced their organisation's ability to provide a palliative approach to care. Selected examples of responses are shown in Table 1.

Table 1: Examples of how employees participation in PEPA has improved the organisation's ability to provide a palliative approach to care

Our nurse has undertaken a post-graduate course to enhance her skills and knowledge in the palliative approach to care.
Policies have been updated that reflects current trends in evidence based care.
Revised policy in relation to medications usage which is related to pain management and nausea.
Updating assessment tools that will enhance palliative care outcomes for patients.
Reviewing of referrals.
Procurement of new equipments.
Modification of current techniques/processes to enhance practice.

Conclusion

Employers of PEPA participants overwhelmingly report positive outcomes from their employees' participation in PEPA. Programs such as PEPA which emphasise experiential learning and transfer of learning into practice have great potential for improving the capacity of the health workforce to provide quality care for people at end of life across a range of care settings.

Acknowledgements

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